

THE PROGRAM OF PHYSICAL EDUCATION AND ITS EFFECT  
ON THE PRIMARY HEALTH CARE IN SELECTED  
SECONDARY SCHOOLS IN LAGOS STATE

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ABSTRACT  
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THE PROGRAM OF PHYSICAL EDUCATION AND ITS EFFECT ON THE  
PRIMARY HEALTH CARE IN SELECTED SECONDARY SCHOOLS IN  
LAGOS STATE

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The benefits derived from taking part in Physical Education lessons were directly related to the health of the school age children. The component of Education, such as physical, social, mental, and emotional aspects have been related to the growth and development of the individual child to maintain a healthy state. In the schools, one of the ways to achieve this goal is through the Physical Education program which is also an aspect of the School Health Program. It is also a part of Basic Health Care Program.

This appraisal of health of the school children has been in operation for a long time in Lagos State Secondary Schools. However, there is a new global change from Basic Health Care to Primary Health Care. It was on this basis that this work was designed to



look into the new health area and determine the contribution of Physical Education program to Primary Health Care.

12 schools were used in this study.

Questionnaires were sent to selected schools in Lagos State and to some medical officers in some Local Government Areas of the state.

The 240 school respondents and the 70 medical and para-medical respondents indicated among other things that the program of Physical Education was reflected in the Primary Health Care in Lagos State Secondary Schools.

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## DEDICATION

To the glory of Allah and the blessed memory of my late father Hameed Atanda Anjorin.

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## CHAPTER ONE

### INTRODUCTION

#### The Problem

The program of Physical Education and its effect on the Primary Health Care in selected secondary schools in Lagos State.

Physical education is an integral part of education in which an individual child engages to have a total education. Through the program of Physical Education, an individual is educated physically, mentally, morally and socially. All these components are directly related to the health of an individual.

The primary aim of education is to educate the whole child. In order to achieve this aim and to maintain the growth and development of an individual child, physical education is taught in schools. The physical aspect of physical education refers to physical strength, physical development, physical health and physical appearance. In its totality therefore, the word physical education refers to the educational program designed to develop and maintain the human body.

Lagos plays a dual role. It is a state by itself and it is also the seat of the Federal Government of Nigeria. As a state therefore, it takes its guidelines and policy from the system operated by the Federal Government. One of such directives of the Federal Government as entrenched in the National Policy on Education of Nigeria is there should be a promotion of emotional, physical and psychological health of all the children. The fourth point in the National Policy on Education with regard to Secondary School Education also states that the government will encourage the requisition of appropriate skills, abilities and competence both mental and physical in individuals.

An example of this is demonstrated in the primary education guidelines where the fourth policy stated that for Health and Physical Education to be meaningful in Primary Education, government will, through Ministries of Education, ensure that school authorities maintain a high degree of sanitation in the school environment. The national policy therefore stressed that the objectives of Physical Education are to:

1. Develop the various organic systems of the body so that they will respond in a healthful way to the increased demands place on them.

2. Develop an understanding and appreciation of movements in children and youth so that their lives will become productive.
3. Help children move in a skillful and effective manner in all the selected activities in which they engage in the Physical Education program and also in those situations which they will experience during their life time.

The above philosophy, policies and objectives among many other objectives of Physical Education, cut across the need for a good Health and Physical Education Program, and proper supervision of the education program at the secondary school stage to develop the whole child.

In line with the Federal Government Policy, the Lagos State Government through its Ministry of Education made Physical Education compulsory in all schools. It is also mandatory in every secondary school in the state to hold an Annual Inter-House Athletics Competition. This decision on secondary schools tallied with the National Policy on Education (1981) which stressed that, moral religious instruction will be taught in schools through "the discipline of games, and other activities involving team work". In

describing the aim of physical education, Nixon and Jewett (1980) wrote that the aim of organized Physical Education program is to create an environment that stimulated selected movement experiences, resulting in desirable response that contribute to the optimal development of the individual's potentialities in all phases of life. The above definition is reflected in the Nigeria National Policy on Education of a child. It is a sum total of the education system. In rounding up the policy of Physical Education, the following contributions by Sheppard and Willoughy (1975) for general education indicated that a growing commitment to the full realization of human potential will place permanent emphasis upon the development of competent, productive, responsible, questioning, value judging, sensitive, compassionate, loving human individuals and their intellectuality as expressed by the concept of self; self-esteem, self-direction, self-control and self-actualization. Along with this goal are the preparation to play many and varied societal roles: citizen, spouse, lover, parent, colleague, worker, player and emphasis on skills which are of life-long importance. Schools will actually attempt to prepare students to live a life, not merely to educate them.

This contribution summed up the contribution of physical education on growth and development of a child. It is one of the bases which stands to maintain the health of a school age child. It could be in recognition of this fact that the Lagos State Government made the importance of this discipline known and effective by making the subject compulsory. It will therefore be significant to evaluate this notion on health of the school age child in some Lagos State Secondary Schools.

Health, on the other hand is described by the World Health Organization as a state of complete physical, mental and social well-being, and not merely the absence of diseases or infirmity. The fundamental human right and the attainment of the highest possible health, is a most important world-wide social goal, whose realization requires the action of many other social and economic sectors in addition to the health sector.

At the International Conference on Primary Health Care meeting in Alma-Ata in 1978 the delegates present at the forum expressed the need for an urgent action by all governments, all health and development workers, all over the world to protect and promote the health of

all the people of the world, and to achieve the aim of the conference which is "Health for all by the year 2,000".

Primary Health Care as reported in Alma-Ate 1978 is "essentially health care based on practical, scientifically sound and socially acceptable methods and technology made universally accessible to individuals and families in the community through their full participation and at a cost that the community and country can afford to maintain at every state of their development in the spirit of self-reliance and self-determination". It forms an integral part both of the country's health system, of which it is the central function and main focus of the overall social and economic development of the community. Prior to this change in health principle, the program of health was Basic Health Care in which Physical Education was an integral part.

With this background information about primary health care, the need for individual health is paramount. The basis of this health care is to make total health of individual attainable by the year 2,000. It is on this fact that this study is being carried out. The emphasis is on the contributions of



physical education in selected secondary schools in Lagos State in order to ascertain the effectiveness or failure of this discipline on the health of a school age child. This is sequence to the health of an individual.

#### The Statement of the Problem

The purpose of this study is to investigate the contributions of the Physical Education program in the state to the new concept of Health the Primary Health Care.

#### Hypotheses

The following are the hypotheses tested in this study:

1. Secondary School Administrators have no idea and also neglect the contribution of physical education activities to achieve the objectives of the primary health care of their students.
2. Physical Education has no relationship with the health of the secondary school children in Lagos State.
3. Maintaining the primary health care of the students is not through physical education activities.

4. That the Physical Education curriculum does not reflect a program to achieve "Health for all by the year 2,000."
5. That medical officers do not recommend physical education to correct some defects in students' health.
6. That the medical officers in the state do not believe in the program of Physical Education to achieve some of the objectives of the primary health care.

#### Limitations

The following served as limitations in this study:

1. All the respondents from schools were in Secondary Schools in Lagos State.
2. The range was classes one to five with majority in three to five.
3. Investigation was limited to two schools each in Lagos Island, Ikorodu, Epe, Badagry divisions and four schools in Lagos Mainland division.
4. The schools were samples of the State Secondary Schools in all the cross sections of their locations.

### Delimitations

The following are the delimitations in this study:

1. The compulsory directive that all postgraduate students should vacate the hall of residence at the end of the June examination created a hindrance with little or no contact with mates, the faculty, and the main campus libraries.
2. Much assistance was obtained through personal contact with the head of the department and supervisors.
3. Much of the work was done at home using information from the questionnaires administered in the schools and hospitals with less contact with the campus academic facilities and equipment.
4. The 1983 General Elections created fear and prevented close movement to the campus to seek assistance.

### Definition of Key Terms

**Primary Health Care:** Health Care system which includes different sectors of health that are brought as close as possible to where people live and work.

**Physical Education:** An integral part of education which educates individuals physically, mentally, socially and morally through the medium of physical activities.

**National Policy:** The federal government of Nigeria white paper on the Educational Policy of the Federation.

**School Age Child:** A child who grows up to the age of attending school from primary to secondary school in the state.

**Health Sector:** All health departments in the state.

**Health and Development Worker:** Medical, para-medical, as well as other health related sections in which people engage in health related discipline.

**"Health for all by the Year 2,000":** The theme of the conference at Alma-Ata 1978 based on new concept of health, the primary health care.

**Alma-Ata:** A place in USSR where the International Conference on Primary Health Care was held between 6-12 September, 1978.

**Health Status:** The degree of wellness of an individual as recognized in Health Education Chart.

**Medical Group:** The Medical Officers as well as para-medical members of staff working in Lagos State Government hospitals, schools, health centers, and clinics.

**Health Appraisal:** Value of health of an individual child usually with an approach to reinforce it.

**Student Health:** The components of health of the students which include the physical, mental, social and emotional stages of their developments.

**Health Principle:** The official guidelines of health institutions and bodies.

## CHAPTER TWO

### REVIEW OF LITERATURE

#### Importance of Play in Childhood Education

The health of the school age child is an important aspect of his life. Childhood is very significant because it is the developmental stage which possesses the build-up, contribution, and total experience in which an individual has to pass through. Every aspect of growth and development of school children is a unique identity which usually, is displayed through playways. Such playways are demonstrated through physical attributes. Anderson et al (1972) wrote:

Observing a group of children engrossed in solving a problem in movement can be a most pleasurable and exciting experience. They may be attempting to balance or travel in some unique way, trying to discover their range of motion, or to see what happens when they spin themselves around. The excitement of discovery is pervasive; expressions of pride, achievement and confidence are seen on every face. This is individualized learning in its most positive sense. Each child is allowed to respond according to his perception of the problem selecting and utilizing information from past experience to solve each new problem, making judgements to the effectiveness of the solution. In so doing, he increases the ability to discriminate appropriate responses - thus increasing his intellectual understanding of movement. Equally as important, he advances in knowledge and understanding as he is ready to do so (p. 5).

In their own opinion children identified themselves in movement patterns through playways which in effect contribute to their growth, development, learning, and identity. These are achieved through the movement pattern in a social class which contributed to a healthy growth of the individual in a group. They are happy within the play set up and they put in their best to the physical display creating initiative forms in the various body languages. That, of course, is the contribution of physical education toward the up-bringing of healthy individuals.

Stressing the importance of play in physical activity for existence, Parker (1974) asserted, that for man, from the beginning, the bodily development was imperative since efficient movement meant survival. The more efficient a man, physically and mentally, will lead others out of danger. The root meaning of the word education is to lead forth (p. 40). Again, Parker reported that Schiller found the connecting link between mind and matter to be creative imagination. Aesthetics unite the sensory and rational nature of man. It is this aesthetic link that evokes surplus energy, physical movement and spontaneous play; it is an inborn desire to create form out of expression.

Aesthetic feeds the emotions, controls instinct, excites and relaxes the soul, awakens beauty, and sublimates passion. It is the sublime in education on which Pestalozzi, Froebel and Herbart sought to build a better mankind. This assertion which projected the inborn link between movement and play to give aesthetic desire is natural phenomenon. Various physical education activities are demonstrated in many forms. These forms are expressed in various games and sports which of course are beautiful if properly demonstrated. The form used in this bodily display is exercises. This is emphasized by Parker saying "man plays and engages in sports to give satisfaction to his creative imaginations" (p. 42). However, this gives some significant attributes to his body for he further said "he plays and moves and strives somehow in some way to build and create beauty" (p. 42). It is very important to note here that physical exercises as a playway method cannot be over emphasized, recognition of this fact, Soyombo (1978) highlighted that through a well-directed physical education program children develop skills for the worthy use of leisure time, engage in activity which is conducive to healthful living, develop socially, and contribute to their



physical and mental health (p. 10). In his own contribution to this, Amusa (1980) quoted Myers as saying, "given a chance your body can accomplish wonders for you. Given a chance, your body can help you realize the latent power for good imprisoned within your unused muscles" (p .21). True to this body development through use, Cagigal (1982) wrote that human intelligence is developed by physical action and language. He further said:

We do not know the cause and effect, that is, whether man, by standing up straight and raising his hands from the ground, then made use of them to fashion tools, or it, on the contrary, he freed his hands because he had to fashion tools. The answer is of little importance. These two facts were indissoluble and coincided with the beginning of the development of the upper cortex and the growth in cranial capacity. The improvement of the manual action was a fact of intelligence as without doubt, is language (p. 744).

What Cagigal is saying here is that man, by various body movement in play have been able to put some seals in the body which serves as a physical therapy. This is able to allow his systems to function very well. He therefore becomes healthy and able to think about solving his challenging problems. Through various exercises he engages in, he is able to perform effectively in mental activities which enhances his other components of his existence. Confirming this

notion, Redfern (1965) concluded that movement by increasing an individual's capabilities, is a means of education in its widest sense. This is useful throughout school life since much of their time in early years is spent experimenting unconsciously with the great variety of effort-combinations which are at their disposal, that is, in playing. Again Redfern reported Laban (1963) as saying, "play is the great aid to effort-capacity and effort-harmonization". This of course is movement, which is a therapy. A dose to heal the body of its excess or to put the organic machine in good motion. Discussing the therapeutic use of the art of movement therefore, Redfern (1965) had this to say. "Because of its fundamental nature, movement is able to make a direct impact upon the individual, and thus affords a very positive course of action. It may also be of value as an ancillary form of treatment or as a sort of catalyst, facilitating other therapeutic procedures" (p. 21).

However, the following analysis of play for promoting emotional health and preventing delinquency by various authorities were cited by Kane (1972) as follows: Slavson (1946) pointed out the value of active recreation for developing a feeling of

self-worth. Bower (1952) calls attention to the potentialities of physical education, recreation and sports for developing qualities such as personal and group integrity, loyalty, cooperation, courtesy, respect for the body, fairness, and that galaxy of traits known as sportsmanship. McKinney (1939) states the values of play as follows:

- i. It increases social poise and spontaneity;
- ii. It develops independence;
- iii. It releases the tensions;
- iv. It forms the basis for friendship, popularity and leadership (pp. 194-95).

Summarizing the research findings in this area, most studies show that active participation in play or recreational activities tend to be associated with emotional health and socially acceptable behavior patterns. Examples of such studies are those by McKinney (1937), Cowell (1949), and Blanchard (1946).

#### Maintaining Health Through Physical Education

In sports, games and physical education circles, the quotation, "mens sana in corpore sano," is as familiar as well as an important principle to strictly adhere to. That is, 'a sound mind is a sound body' is a wholesome fact. It is as old as the Greek era when

physical education enjoyed its golden period. The principle of inseparable mind and body was preached. Exercise for body and music for the soul was as important as their daily food. A research fellow at the University of Ibadan, Sofenwa (1977) puts it, "the purpose of games is to develop a healthy body as a fit and healthy habitat for the development of a sound mind".

Perhaps, it is important to look at this extract from the Coach Manual which points out the view that it is generally agreed that individuals can learn things in one situation that will influence their behaviors in another. The athletic field and the gymnasium may be considered laboratories where lessons of life are learned. Athletics abound with dramatic, emotional, personal and intense situations... Athletic participation not only promotes the development of but also provides visibility of an athlete's courage, perseverance, unselfishness and stamina. If these characteristics are latent, the demand of highly competitive and demanding experiences will reveal them. As individuals challenge to achieve things which they believe they cannot do, they often discover hidden resources which enable them to accomplish their task.

Confidence which is tested in the fire of competition is real and lasting (p. 14.)

The coach went further, to break down the values of physical education in the sporting individual as saying, that although it is obvious that to engage in athletic activities develops one's physical strength, endurance, agility and speed, it is less commonly understood that participation in athletics also satisfies other needs. For example, the need for belonging, peer-approval, self-esteem, and the approbation of authority figures often occurs through the development of competencies in games and sports. The development of a positive self-concept and the poise and personality improvement that result can be important for the young athlete.

The above write up in the Coach's Manual of the National Association for Sports and Physical Education of AAHPER clearly gave the values through participation in physical education activities. It is a total development in an individual because it takes care of all the aspects of a wholesome development in an individual. In the words of French author Montaigne's essay "Of the Education of Boys", in which he recommended games and exercises as a major role in the

educational program for young men, he said "I would have a graceful exterior combined with a tactful manner; the body and the mind should fashion at the same time". He continued, "It is not a soul; it is not a body that is being trained; it is a man; they must not be separated. (p. 1). Novich and Taylor (1972) reported that "it is in athletic settings that the athlete learns to give and take and to be able to accept success or failure and the joy or disappointments that go with them in a sportsmanlike manner" (p. 2). Reacting also to the tenacious belief in old-fashioned taboos that ladies should not sweat, and that girls lose their femininity by engaging in strenuous activity, as a cause to menstrual difficulties or impaired reproductive potential, they cited the crowning of Judith Anne Ford as Miss America for 1969 competition, yet this "young woman gave a superb performance of complicated gymnastics on the trampoline in the talent competition". Like the demand of any physical activity, perfecting her routine surely requires many hours of work and sweat as well as dedication and discipline. "Women sports teams are composed of girls attractive to face and form who carry

out athletic skills in a manner that is a pleasure to behold.

Furthermore, it was also stated that American sports annuals document scores of female athletes, some of them of champion caliber who have married and led full lives as wives and mothers without adverse physical defect. Still confirming health through physical education, Novich and Taylor (1972) reported a Hungarian survey of athletic women as opposed to non-athletic. They reported that Erdelyi made a survey of 729 married Hungarian women athletes during pregnancy. He found that the duration of labor and the necessity for cesarean section was 50 percent less than those of women in a control group (p. 2).

Further to this health concern, Novich and Taylor (1972) strengthened that sports enhance health and develop physical fitness of the participants, giving youngsters a healthful, and social and emotional outlet for aggressive and competitive needs (p. 2). In his own contribution on Cricket as a sport to enhance good health, Ali (1981) explained that it called certainly for courage, self-sacrifice, the ambition to achieve international standards and so on, but the rewards of life-long friendship and other less tangible things

were emphasized equally (p. 3). Signifying his own contribution about physical education and sports on health, a devotee of Olympic movement, a prolific sports writer, and a dedicated academician, Oduyale (1982) reported in Olympic Review that:

The Olympic Movement definitely has a happy future if only sportsmen all over the world will realize that the olympic games are purposely and simply to bring the youth of the world together in the spirit of brotherhood through active participation in sports activities, thus encouraging healthy rivalry among the nations. It should never degenerate into a desire to beat Moscow, or the United States or Germany or Cuba (p. 740).

This important fact, stated by Oduyale highlighted the good use and intention of a good physical education program to take part in a good spirit to develop the mind and body. By engaging in physical competition, individuals should seek the reward, aesthetic and therapeutic benefits of physical competition and not the rivalry, political achievement and the goal to win. The emphasis is on contribution of physical exercises and competition on the development of body parts and general education experienced in such a big game. It is unfortunate that the political situation of such big games is becoming pronounced, "yet no educational or health officer would deny the importance of games and exercise to the physical and mental well-being of an



individual", expressed by Sofenwa (1978). He continued, "games and physical education promote health. But health is not an end in itself, but a means to an end. The end being the enjoyment of a full, rich, happy and productive life (p. 114). One cannot but agree with Sofewa's contribution on this issue of health attainment through the physical activities. He even brings further dimension into the physical contribution to health by reminding us that health is not an end itself but a means to an end. Also, that physical education is contributory to health for he says one needs a sound and healthy body not just for sake of physical per se, but as a suitable and desirable habitat for the development a sound and healthy mind".

Considering the importance of physical education as a trace of personality development, Eysenck (1960) defines personality as the more or less stable and enduring organization of a person's character, temperament, intellect and physique, which determines his unique adjustment to the movement. In other to fully understand this definition and relate it to the

topic, it is important to break it down. Arnold (1972) did this by explaining:

Eysenck goes on to associate character with will or cognitive behavior; temperament with emotion or affective behavior; intellect with intelligence or cognitive behavior; and physique with bodily configuration and neuro-endocrine endowment. The area with which physical education deals is similar to the regions covered by the term personality. In fact, it aims to affect and modify advantageously the development of personality through medium of physical activity. Whereas, personality is a state of being, physical education is a process of doing" (p. 1).

What Arnold is saying here is that there is integration between health and personality. This is true. It will be good to look at this in the manner Thomson did: "The healthy man had a wholeness or oneness of physical life while the unhealthy man is always distracted and though the healthy man may be torn by temptation and puzzled by the unsolved problems of life, he has not often to fight a battle on two fronts, for health implies some degree of unity. The unhealthy man on the other hand, has always to face bodily discord as well as ethical and intellectual difficulties. He is not at peace with his own body"...

In explaining this, perhaps it is better to illustrate its meaning with Mohn's (1927) explanation. It states as follows: "there is no such thing as a purely psychic illness or a purely physical illness,

but only a "living event" taking place in a living organism which is itself alive only by virtue of the fact that in it psychic and somatic are united in a unity" (p. 772).

True to the above quotation, and to remain healthy, the situation of the mind should be in balance with the body. The mind and body relationship is very important in achieving the health goal of the individual. It is absolute and it is a total thing. As Arnold (1970) reminded us, "one of the fundamental laws in physiology is that the functional efficiency of an organism improves with use and regresses with disuse" (p. 19). That is, the body which can be considered the human machine should be kept in good order and the medium in which this can be achieved is true physical exercises. Maybe that is why Ajiduah and Nossek (1980) considered the game of volleyball as an important aspect of such medium by saying, "Volleyball is a desirable sport by any standard of evaluation, which demands a high degree of neuromuscular coordination, great physical and psychological fitness" (p. 11). Also, maybe that was the reason why Diagram Group (1976) claimed in their foreword that gymnastics is one of the purest of all sporting activities,

proving the human body capable of movements and forms of the great beauty. Another dimension one can claim here is that every sport or game have some therapeutic input into the human body to maintain his optimal function. However, this notion was quite true and an age long tradition as reported by Bogt (1936) and Harris (1964) that establishment of Panhellenic Games, the most famous of which were the Olympic Games, in time produced coaches and trainers to assist athletes in achieving a peak of physical perfection.

#### Physical Education as a Determinant of Health Status

As Arnold (1972) puts it, "Physical Education is an integral social and emotional aspect of an individual personality through directed physical activity" (p. 1). That is to say, physical education educates an individual physically, mentally, morally, and emotionally through physical activities.

Similarly, health, as defined by the World Health Organization, "is a state of complete physical, mental, and social well being, not merely the absence of diseases or infirmity".. (Tunner, p. 2). The straight forward inference from the definition above is that health means more than just looking good or radiant in

outlook. It has to do with the state of mind as well efficient function of body systems.

While physical education educates mentally, socially, morally, and emotionally through physical activities, health is a state of physical, mental, social balance and not just looking good. But it is significant to note the components of the two subjects. Physical education components are physical, social, mental, moral and emotional, while health education variables are physical, mental, and social well being. Comparatively, the two components of physical education and health are basically the same. But they both have different variables in achieving their objectives. It will therefore be necessary to look at each component in relation to its importance of the subject.

### Social Health

In his study about the future of Olympic Movement among sports celebrities in Nigeria, Oduyale (1982) quotes the then Director of National Sports Commission as saying, "the olympic games will survive because the Olympic Movement, is one of the social forces of our time". Perhaps that is social implication of physical education in a world-wide contribution.

Looking at this in developmental stages, Cowell (1953) wrote, that health, strength, and physique determine to great extent what and especially how, a child plays. Play skills, in turn, are of major importance in companionship and friendship in the social relationship of children.

So usual is this form of adjustment that Bridges (1931) regards it not only as a normal stage of development but a necessary one. If he makes friends with some of his playmates he will also make friends with others. The recompensating value of this rivalry of groups, says Isaac (1933) that:

It brings to children the active experience of mutual consideration and help within the group. They get the feel of working and playing together. They suffer the pressure of other people's wishes contrary opinions which are yet not too different, not altogether contrary, since they come from friends. Each child's friendliness to his fellow members of the group makes him more ready to give way to see their point of view" (p. 394).

Furthermore, Isaac contended, "the notion that children must not be interfered with at all, but left to work out their own salvation, without control or guidance, is however, seen to be without firm basis. In some directions, the child cannot do without our guidance. He needs the help of external restraints in learning particularly, the aggressive one". Mellor

(1953) regards this as "the interchange of ideas and understanding and tolerance that these things bring, all contribute to the development of child as a member of society" (p. 115). These views as expressed by the authorities gave the importance and the significant contributions of physical play in the developmental stages of life.

However, Car sees in the social games of the child a reminiscence of the collective unconscious and an exercise fixing the newly acquired functions of duties. Still further enhancing this fact Padmanabhachari (1941) writes:

Human life and human institutions can be better understood by and indeed cannot be thoroughly understood at all without a study of life of primitive people including even their past times, the games they played, the sport they engaged in...play patterns are an integral part of all human culture wherever mankind is found and in whatever state of advancement the culture may be. A study of the play of primitive peoples will throw much needed light on the nature of the play tendencies of mankind as a whole. Moreover, a study of games and sports will reveal to us the nature and extent of civilization of the race (p. 11).

Writing on "The opportunity to be Relevant" on the sociological foundations of physical education, Briggs (1974) gave his experience as Superintendent of Schools in Cleveland, Ohio thus:

From my experience over the years as a high school school administrator, as a member for about eight or ten years of executive committee of a high school athletic governing board, a member of a state board and many other associations, I have found that physical education and athletics do something for young people that cannot be equalled anywhere else in school. I have seen young men and young women, but more particularly young men, heading straight for trouble - academic trouble, personal trouble, trouble with the law and everything else. Then when they came into a real experience in physical education or athletics, they suddenly began to find themselves. I have seen so many success stories come out of the athletic plan that I cannot help but stand here this evening as perhaps the strongest advocate of any of the city superintendents of America on behalf of a revitalized and effective program of athletics and recreation (p. 235).

This speech by the Superintendent of Schools is self explanatory about the solution of youthful social problems in America. Again, Kane (1972) reported "there is plenty of evidence that the handicapped are not as well-adjusted as normal children". He goes on "according to Telfore and Sawrey (1967), they show variously a higher degree of emotional instability and social maladjustment and a higher incidence of behavioral disorders". Kane also reported Rawls (1975) as findings that it is in play and play-like activities that children first learn to adjust to other children and to social situations, in this respect physical education, with its bias toward play, becomes a powerful tool in the hands of those responsible for



dealing with the emotional and social growth of the handicapped, he also reported Jackson (1957) suggested that it is through play that a blind child shows others what he thinks about himself. It is here he can experience achievement and success and social acceptance and has a chance to correct the image that he holds about himself. The child who is denied play and recreation, however, often retreats into fantasy and fails to develop skills which make him socially acceptable to his friends. Furthermore, in a case study on the development of a blind spastic child a good program of physical education activity with emphasis on play activities resulted in the child making good progress, intellectual potential was realized and social emotional growth were much improved expressed Cohen (1966). Most of these studies, Kane went on, indicate quite clearly that physical activity, whether it be in the form of structured program or an spontaneous play, has a very important contribution to make towards the emotional and social growth of the handicapped.

However, in Nigerian experience, Oduyale (1974) writing on the School Sports Day otherwise known as Inter-House or Inter-Hall Sports Competition, gave the

reason of such social organizations as "an attempt to advertise a school or a college, and also to assert its place not only among sister schools but also in the society". This is because, as he puts it, "the school and the society should be inter-dependent (p. 1).

Making his own contribution towards the social lesson involved in physical education Sofenwa (1977) said that: Children love games and children learn a great deal from informal activities. Real education in fact often takes place outside the classroom. If gamemasters and sports officials see themselves as formidable agencies in molding the character of youngsters, they would be doing a lot in the transformation of our society (p. 100). In his own contribution about the promotion of mental health of Nigerian School Children Jegede (1978) pointed out that "as a child who feels insecure and has a strong need to be accepted by others may derive much benefit from being a member of a group of children who share a lot of things such as playing and studying together". While rounding up his essay on education, Ajala (1978) stressed "offering adapted physical education in the primary schools and continuing through the secondary school and college, will assist the individual to

improve function and make adequate psychological and social adjustments. He went on "it will prevent the attitudes of defeat and fears of insecurity. It will be a factor and in his attaining maximum growth and development within the limits of the disability. It will help him face the future with confidence" (p. 11). The social contribution of physical education to health of the child is so enormous. The contribution of this aspect to the basic need cannot be overstressed, therefore, in the words of Soyombo (1978) "each individual has certain basic social needs to be met...when these needs are met, the individual becomes well adjusted socially. When they are not met, antisocial characteristics develop" (p. 13).

### Physical Health

The physical attributes of an individual is also an important aspect of his growth and development. This is recognized in both the health and physical education as the optimal growth of an individual. It also follows the natural growth gradient. Therefore, it is a significant attribute to note. Redfern (1965) quotes Laban thus:

The elements of movement derived from the physical factors of time, space, weight and flow, and thus in any action-sequence, particular qualities and patterns may be identified and recognized and the structure of the whole studied systematically. It is these chains of movement elements, and the shapes in space to which they give rise, which reveal personality, since the kind of mental effort which each individual exerts whenever the slightest movement is made to become externalized in bodily action (p. 5).

However, Cratty (1967) defines growth as quantitative change, measurable variations of body size and proportion. While development is a far more general concept and may refer to quantitative structural changes as well as to a variety of other bio-psychosocial attributes (p. 7). He further described the athletic growth among adolescents as contributing to group approval. This is because the adolescent's feelings of worth are decidedly affected by the extent to which he achieves success in athletics. In his finding, Jones (1949) discovered that among boys lowest in strength, most tended toward social introversion, felt a lack of status and evidence feelings of inferiority. While still comparing, on the other hand, males scoring in the upper extremes in strength seemed to experience no such negative feelings about themselves and, on the whole, evidence favorable personality traits, reflected in healthy aggressiveness

and the attainment of leadership role. Furthermore, potential beneficial effects of exercise on general body growth on healthy young boys and girls, (late teens) who had engaged in strenuous physical exercise during childhood. They continued that "they grow taller and heavier with large chest girths and knee joint widths". He further reported, "there is some evidence that the onset of rapid pubertal growth in girls is accelerated when they have participated in competitive swimming for several years". Comparatively however, the size at maturity did not differ from that expected from non-participatory population.

The physical growth of an individual is a major contribution to his health. Describing African experience Awoniyi (1979) wrote:

The physical development of the child has an important influence on his behavior, how he sees himself and how others see him. In Africa there are different attitudes to people who are short, tall, fat, thin or black...If a child increases in stature and weight, if his muscles becomes strong, if his sex organs grow well, if his brain matures and if his internal organs grow well in size and efficiency to meet the requirements of his growing body, then such a child will have the personality and capacity to learn, and to become an adult. Any deficiency, natural or unnatural, could lead to retarded development of the child, one way or another.

Awoniyi further remarked:

Good health is essential to normal growth. Health conditions in childhood, however are closely associated with the social and economic position of the family. Many families in Africa still live below the poverty line. This has affected the physical development of many children, which in turn affects their ability to learn well. An important responsibility for the teacher which is linked to this is the need to improve on and maintain the sanitary conditions of school and classrooms, so that children may be encouraged in healthy habits...a child who is physically maladjusted may develop undesirable behavior patterns; a child in pain cannot be expected to concentrate (p. 80).

The healthy child, in contrast, is full of energy; he is alert, plays heartily, and is generally involved in all learning activities. Thus teachers must contribute to the physical growth of the child.

The physical development of an African child by Awoniyi cannot be disputed. It is nothing but a statement of fact about the authenticity of an African child. His work really has a comparative analysis of the physical development in African setting. Ideally, this experience also holds true for Nigeria. The physical development of a Nigerian child is tied to the increase in stature and weight, muscular strength and other such physical enlargement. And this is, always assume the meaning of a healthy child. Such developed through many physical activities as Soyomobo puts it:

these systems are stimulated and trained through such activities as hanging, climbing, running, throwing, leaping, and jumping. Health is also related to muscular activity; therefore, activities which bring into play all the fundamental "big muscle" groups in the body should be of a vigorous nature so that various organic systems are sufficiently stimulated (p. 12).

### Mental Health

The contribution of physical education to the growth and development of mental health of a child is a very important aspect of the discipline of physical education. Prior to the research into this by physical educators in Nigeria, almost all parents held the erroneous beliefs that physical education and sports stood as obstacles to the mental development of their wards. Some of the parents even believed that it was the less academic individuals among their children that took to sports. This is because in some developed countries, because the colored are doing best in sports, it is assumed they are less brainy. These assertions stood between physical education, sports and its development among the youths of the world. However, physical educators all over the world took this challenge in their various regions and came out with scientific and factual explanations about this notion. "Athletics are, first of all, educational

media through which one may train his body so that it responds precisely, quickly, efficiently, and automatically to the impulse from his mind.

Furthermore, the physiological development that physical activities contributed to the body was also stressed. It went thus: the present realistic and emotional experiences, situations in which the individual's physical short-comings, his ability or inability to adjust to other persons, his emotional reactions, his drives, energy, determination, or lack of it, in short his personality with all, its quicks and ramifications, is etched out for examination.

Furthermore, Long (1971) made the following statement at the AAHPHER National Conference on Values in Sports:

We not only believe in collegiate sports but we know that sports constitute one of the most powerful forces in American society today. Sports are not something theoretical or abstract, but rather a dynamic activity with the unpredictability of the human force. We need to concentrate all our intelligence, all our enthusiasm and efforts toward preserving what is good in athletics (p. 13).

In this same reflection of looking at the contribution of physical activities on the mental development, perhaps it will be good to look at sports champions and celebrities of the world and their academic achievement or discipline. "Basketball is for



the brainy". This report was credited to the soviet coach of TTT Women's Team in Riga, the Latvian capital. The team won the Soviet National Crown (19) nineteen times and the European Champions Cup (17) seventeen times. The team is twenty-two years old with over sixty players among whom are Vita Siline, a chemist who won the state prize, Skaidrite Simildzina-Budovska, Iveta Kraukle and Lorita Sausa who are diplomaed engineers; pharmacentists Relena Bitnere-Rehta, Ingrida Blume and Jolenta Kalnina, Layer Silvija Kroders, lung doctor Zanda Grave, dentist Maiga Trunkmane, artist Inara Apse and teachers Tamaea Handele and Luliana Semenova. All these are women in physical education and sports. The following issue of this magazine, "Sport in the USSR" (1983), reported 82 ten best among whom are Anatloy Karpov, a three-time world champion. He is a board chairman of the Society Peace Fund. A researcher at Moscow University; Vladimir Salnikov is a three-time olympic swimming champion, world champion and world recordholder. The 22 year old student who lives and studies in Leningrad, Vladimir has made the top ten for the fifth time. Natshia Petruseva has captured up to ten in speed skating in the olympics, world and European championships. The 27 year old

graduate student is a resident of Moscow and studies at the Institute of Physical Education. Rnat Dassyer, a 25 year old student from Moscow, is an olympic bronze medalist and Vladimir Balyberdin is a merited master of sports in mountain climbing. Living and working in Leningrad, he is 32 years old to mention a few. As also reported in the Newsweek, the international news magazine (1983) thus:

Many third world athletes follow a different program of study when they go to the United States. Jamaica's Best Cameron, who is favored to win the 400-meter dash, attends the University of Texas at El Paso as do Zak Barie and Gidemas of Tanzania and Mathew Mothwaretue of Botswana. All of them are contenders in the 10,000-meter (6.2 mile) race. Americans find the Africans a constant source of surprise, especially when as unknowns, they win their first race by wide margins (pp. 40-41).

Larry Heidebrecent, coach at El Paso University had this to say, "these guys come out of the woodwork. They are amazing". Reporting Americans' chances at the 1984 olympics, another edition of the Newsweek (1983) highlighted the following athletes with academic inclination such as Carl Lewis, a 22 year old junior at the University of Houston, is a long jumper and sprinter for America likely to bag gold medals for America at the 84 Los Angeles Olympics, Edwin Moses, a 400-meter hurdler and a gold-medal winner in the 1976

Montreal Olympics, graduated in dual majors with a nearly straight average in physics and engineering from Atlanta's Morehouse College. What can be more convincing about this component of physical education to the mental alertness and health of the participants as Oduyale (1982) puts it, "a physically fit person should be fit to live within any situation he finds himself" (p. 11).

#### Primary Health Care Through Physical Education

Much has been said about the contribution of physical education to the health of an individual. In the early part of one's development, an individual goes to school to be educated. In the process of this, he learns many things, most of which contribute to his development as a healthy person. Both men and women in this era can be active or passive performers of physical education. In men, learning physical education, taking part in competitive sports or recreation continue in later lives provide; vigor, flexibility, vitality and other such variables of good health. Such healthy persons, by and large, are supposed to transfer good and healthy hereditary potential to his offspring. The same goes for the women sports participants and ability to have easy

childbirth. This implies that this aspect of the objectives of primary health care which involves, in addition to the health sector, all related sectors and aspects of national and community development, in particular agriculture, animal husbandry, food, industry, education, housing, public works, communications, and other sectors; and demand the coordinated efforts of all those sectors. In continuation of the guideline at ALMA-ATA (1978) "Health for all by the year 2,000", the conference recognizes the second objective, "providing promotive, preventive, curative and rehabilitative services accordingly" (p. 4). One of the ways to achieve this aspect of the health of school children is through physical education at schools. It is necessary to stress here, that the need for an adequate physical education program to achieve this requires an immediate planning if we are really serious about our school children's health. In its affirmations the Educational Policies Commission of Division of Men's Athletics, AAHPHER (1971) states:

We believe in athletics as an important part of the school physical education program. We believe that the experience of playing athletic games should be part of the education of all children and youth who attend school in the United States. Participation in sound athletic programs, we

believe, contributes to health, happiness, physical skill and emotional maturity, social competence and moral values. We believe that cooperation and competition are both important components of American life. Athletic participation can help teach the values of cooperation as well as the spirit of competition (p. 11).

Relating to this aspect in a seminar paper, Tundum (1981) informed that there is one right or easy way to educate people to be interested in their health or in environment. The fact remains that people of all levels need to be educated to achieve maximum results in improving their health standards, reduce or eradicate major health problems and hazards, promote vigor and well-being. Such a healthy population will be energetic, alert and more productive. True to this contribution Schwank (1971) wrote, "sports and athletics are offered primarily for the participant, at the participant's level, in terms of the participant's present and future needs and goals, and most important of all, as a means for preparing for life, whether this be a career in the field of sports and athletics or in some other field.

In continuation of his argument, he went on: "today, science has rejected the dichotomy of mind and body; biology, physiology, psychology, sociology and philosophy recognize the fact of organismic unity. Not

only is the individual a whole, but he a part of his environment with which he reacts and interacts in a total situation" (p. 8). Relating to physical education, he advanced thus:

This concept of the education of the whole person necessarily includes physical education, of which athletics is a part. As a part of the concept of wholeness of the organism, physical education, including athletics, becomes education, through, or by means of physical activities. This means that athletics, like all education, is concerned with intellectual, social, emotional, and ethical, as well as with physical outcomes (p. 8).

Maintaining students health, therefore has many directions. Having confirmed this above and with the role in which physical education, athletics, and sports play developed country like America, it will be a point of interest to look at the same in Nigeria, participation in athletics alone is not sufficient to socially move an athlete up the ladder. He has to be intelligent. He should be physically fit and have brains (p. 179). Further to this comment, Oduyale revealed the unfortunate occurrences facing students' participation in sports in this country up to even the university level.

A good athlete on being admitted to the University may find himself persecuted if his or her professor is anti-athletics. It is not impossible that a professor will ask the athlete-student to choose between athletics and academic (p. 180).

This situation, true as it is, identified the unpreparedness or unawareness of the Nigerian educational planners to take care of the health of the college student. The problem of a college student is a complex one and most of which is solved through socialization which is an aspect of mental health, an aspect which is very important in the student's health. It can make or mar the developing individual. The adolescent period is a crisis period which involves having the proper or healthy association. For Oduyale said, "sociologically, a person's needs are those that pertain to the pattern of how he fits into the society in which he lives and must be fit to live and fit to live with". He went on further that physical fitness does not necessarily mean muscular strength, neither is it the same as health education or physical education. He quoted Bucher as saying "fitness is ability or a person to live a full life and balanced existence". Oduyale further explained and strengthened, the totally fit person possesses physical well being but also such qualities as good human relations, maturity and high ethical standards. Such a person also satisfies such basic needs as love, affection, security and self-respect (p. 175).

Follow up to this Nigerian experience, there were a lot of papers presented at the First International All African Conference on Health Education held at the National Theatre, Igamu, Lagos between 31st August to 5th September, 1981. At the opening address the Honorable Federal Minister of Health, Dr. Danile Ugwu (1981) declared, the theme of the conference as "Health Education in Primary Health Care" is most appropriate especially as the current global focus is on "Health For All by the Year 2,000". He went on further, "primary health care demands a multisectoral approach; and factors such as adequate and hygienic water, basic sanitation, better nutrition, immunization against major disease and health literacy must be taken into consideration". Dr Ugwu supported himself with the statement from the World Health Assembly thus: "It is the attainment by all people of the world, of a level of health that will enable them to lead a socially, economically, productive, and satisfying life. It means health development activities aimed at maintenance and improvement of health for all". Furthermore, the catchment area for primary health care is very wide, and is through the collaboration of all concerned that a sound and national health policy can



be articulated he asserted. He appealed to the participant to come out with a blue print that is pragmatic and capable of execution taking into consideration the complex matrix of our culture, custom, tradition, beliefs, habits and attitudes.

In his own contribution at the seminar, Kari-Kaskinere (1981) the Director, Seventh Day Adventist Health Services in Nigeria, gave the objectives of primary health care program in their Parish as: 1) to lessen the suffering in our world; 2) to purify the body and mind of each member of the church so that they may discern God's will and develop his character. What a beautiful use of physical therapy to purify the body to meet up the spiritual demand. He further highlighted, "the centers stress the importance of diet and exercise and give instruction in broad ranges of health related topics. Through these physical exercises, it now recognizes that a number of diseases can show marked improvements through life style changes. These include, coronary artery disease, elevated blood lipids, and artheroclerosis, hypertension, diabetes, obesity, chronchitis, selected stress problems". Finally, in this section, Kari Kaskinere said that health is a

result of a life style; not a matter of luck, fate, and other people's fault.

Discussing his findings in his experimental finding on the issue in rural community, Akpovi (1981) reported that primary health workers can make enormous, successful, and acceptable impacts on their co-villagers by orientating them socially, physically and psychologically towards the right action to improve their health. This is very much the same with what Akita (1971) defined in her own definition of primary health care as the health approach that provides comprehensive, simple, inexpensive and effective services that are easily accessible to all members of a community, both sick and well, to improve their living and health conditions. It is the individuals first point of contact to enter the health care delivery system. Therefore, if primary health care covers this scope, it will be appropriate to look at it with the benefit from physical activities.

Sport in the USSR (3:83 "240) carried a report, "What has sport given you", under the title "The Women's Age is Here". The following are extracts from

the compilation: writing under the caption "Bringing Science into the picture", Professor Nina Grayevskaya revealed:

It should not be forgotten that a women is first and foremost a mother who is responsible for the continuation of the human race, and athletic interests must not be permitted to push into the background this humanistic pre-destination. Women who go in for sports to a reasonable degree, have it easier at childbirth, and as a rule, their children grow up healthy (p. 21).

No wonder Nicole Dechavanne, member of the French NOC and president of the French Federation of Physical Education believed precisely that it is sport that makes women more attractive, help to 'cope' with the accelerated pace of life, and keep up with the ever changing conception of women's beauty (p. 19). Irina Fodnine, three-times olympic figure skating champion revealed that I was able to get an idea of beauty, to understand what is truly fine in art and, of course, in figure skating...I owe my happy family to sport.

Furthermore, Fencer Maxine Mitchell of the United States, mother of four, competed in the Olympic Games of 1952, 1956, and 1960. Hungarian Fencer Magit Nagy-Sandor, mother of three, won a silver medal in the team scoring at the 1948 London Games, Francine Blankers - Koen of the Netherlands, mother of two children, starred at the London Olympics, where she won

the 100 and 200 meters races, the 80 meters hurdles, and was a member of the team that won the 4 x 100 meters relay. After capturing gold medals at the Winter Olympics in Sappora and Innsbruch, Irina Rodina took time out to bear a child and then came back to win her third gold medal in pairs figure skating at the Lake Placid Games (pp. 14-19). All these research findings confirmed Professor Nina Grayevska statement about effect of exercise as a good therapy to aid childbirth delivery system. This finding revealed the significant effect of physical exercises in primary health care delivery system.

However, it is rather unfortunate that the adequate physical education activities is yet to take effect in Nigeria. The reason for this is complex. The right people are not in right places and those who make decision are either ignorant of this significant aspect of our civilization or have a myopic view of the situation. Udoh (1981) reported that a few of the schools with suitable playing spaces had these take up for the construction of additional school rooms required for the University Primary Education (U.P.E.) program. He concluded in his research that there were no noticeable features like goal posts or netball rings

or volleyball courts in most schools and this was a clear indication of lack of seriousness of most administrators toward the need for games and physical recreation.

The Lagos State Schools Administrators are very much guilty of the above findings by Udoh. Observation about the physical education program will not be short of this finding. It may be good that this work will seek a solution to this important aspect of the school childrens' lives in the state. This is necessary because in his own work titled "Health Education as a Medical Cost Reducing Agent", Fawole (1981) recommended price reduction through physical exercises. He went further to say:

A well structured program of physical exercises can assist to alleviate the problem of arterio scleros and coronary heart disease prominent among men and women in this country. Also physical exercise can do a lot to improve the health of the lungs and entire respiratory system. This is evident in the manner in which the muscles that control the expansion and contraction of the rib cage the diaphragm are strengthened and remove more carbon dioxide wastes. An engagement in physical exercises can quicken the elimination of wastes through kidneys, lungs, intestines and skin through the stimulation of the excretory system. Also, rather than squander money on purgatives, mild physical exercises can aid digestion".

Nothing is so absolute than this finding about the contribution of physical education on the health of an

individual. It is worthwhile to note that the role played by physical education through exercises to maintain the promotion, prevention, and maintenance of health cannot be over-emphasized. The need to maintain primary health care through the physical exercises is therefore paramount in all its ramifications. Maybe one of the ways to achieve this in the secondary school system is through physical education program.

## CHAPTER THREE

### METHODS AND PROCEDURE

#### Introduction

The method used in collecting information in this work was by meeting students in their classes and distributing the questionnaires to them in some selected secondary schools used in Lagos State. The write up of the questionnaire appears in the Appendix I at the end of this work.

Also, the second part of the questionnaire which was designed for medical officers in various hospitals were distributed for them to be completed.

#### Development of the Questionnaire

In designing the questionnaire, some books were consulted. The information obtained in these books served as useful guidance in framing and writing up the questions. Examples were drawn from Tuckman (1978), Dalzell-Ward (1976), Federal Government of Nigeria National Policy on Education (1981), Nixon and Jewett (1980) and Alma-Ata (1978). The Alma-Ata 1978 was very significant because it was the report of the International Conference on Primary Health Care, held at Alma-Ata, USSR, in 1978 and was jointly sponsored by

the World Health Organization and the United Nations Children's Fund (UNICEF). It contained the declaration from which the aspect concerning the idea of this work in respect of the questionnaire was drawn.

This author was the moderator for one plenary session in which Dr. J.O. Fawole of the Institute of Physical Education, University of Ife, Ile-Ife presented a paper titled, "Health Education as a Medical Cost Reducing Agent", during the First International Conference on Health Education held in Lagos in 1981. There were lot of reactions on this paper, especially what physical education can do to help in achieving the desired goals and objectives of the primary health care through physical education activities in schools. This experience, from the conference, provided some guidance on the method of designing and carrying out research on this topic.

#### The Distribution of the Questionnaire in Schools

Before the division of the state into local governments area Lagos State was divided into five divisions, namely: Lagos Island, Lagos Mainland, Ikorodu, Epe and Badagry. Twenty questionnaires were administered in each school in those divisions and the schools included:



A. Lagos Island

1. King Ado High School, Isale-Eko, Lagos
2. Lafiaji High School, Lagos Island, Lagos.

B. Lagos Mainland

1. Ausar-Ud-Deen Grammar School, Surulere, Lagos.
2. Holy Saviors College. Isolo, Lagos.
3. New Era Girls Secondary School, Surulere, Lagos
4. Eric Moore High School, Lagos.

C. Ikorodu

1. Ikorodu High School, Ikorodu, Lagos.
2. United High School, Ikorodu, Lagos.

D. Epe

1. Ogunmodede Grammar School, Epe, Lagos.
2. Epe Girls High School, Epe, Lagos.

E. Badagry

1. Badagry Grammar School, Badagry, Lagos.
2. Trinity Secondary School, Ajegunle, Lagos.

Plan for Data Analysis

The groupings of the questions contained in the questionnaire were done with the view of analyzing the data collected. Each questionnaire was divided into three sections, namely: The Administration of Physical Education in Schools, The Program of Physical Education, and the Health of the Individual, as regard

taking part in physical education and this was to test the effectiveness of the care of the selected secondary school children. Also, the questionnaire distributed to the medical officers contained the necessary questions on the information needed about their opinion on the job experience and on the contribution of physical educators to the health of students in the state. It was on the basis of this grouping that the data was analyzed and presented using the statistical measures of frequencies and percentages as the media of interpretation.

#### Organization of the Data

The data obtained from the questionnaires would be in a size of tables to give information under the following variables.

1. Organization of games played in schools.
2. Frequencies of the physical education lessons in schools.
3. Facilities and equipment available in schools.
4. Contribution of physical education lessons in this school health program.
5. The contribution on non-contribution of physical education lessons to the health of individual students taking part in the lessons.

6. The purpose of taking part in physical education lessons to enhance the reinforcement of the health status of the students.
7. The opinion of medical groups on the contribution of physical education activities to reinforce the health of the students in the schools.
8. The contribution of physical education activities to achieve this aspect of the objectives of primary health care in the schools is in Lagos State.

This of course, would be followed by the discussion on the results obtained from the data.

## CHAPTER FOUR

### RESULTS AND DISCUSSION

The purpose of this study was to investigate the effect of the contribution of physical education programs on the primary health care among secondary school children in Lagos State.

In doing this, the study was carried out in some selected secondary schools in the five divisions of the state. Questionnaires were distributed to the students in their classrooms to fill. The data analyzed in these chapters were the feedback from the students' responses from medical and para-medical officers in some of the state hospitals.

The scores from the respondents were computed into twelve tables to answer the questions. Some questions were fused up to make a table. The students' questionnaires were divided into three sections namely: the games played, equipments and facilities; the administration of physical education in their schools and the health aspect. It was found that not all the respondents answered all the questions in the questionnaires.

### Nature of the Respondents

The total number of respondents from the twelve schools used were 240 students. Twenty questionnaires were filled in each school. However, in this table, the overall nature of the students was divided into male and female. The total number of the male respondents were 122. This represented 50.8% of the total number of respondents. The total number of the female were 118, which showed 49.2% of the overall respondents.

Table One

Overall Nature of Student Respondents		
Sex	Number	Percentage
Male	122	50.8
Female	118	49.2
Total	240	100.0

From the table above, it could be seen that the number of the males, 122 or (50.8%), was closely followed by female which was 118 or (49.2%). This design was deliberate. Apart from 10 other schools that were mixed secondary schools, 2 separate girls schools namely: New Era Girls Secondary School, Surulere and Epe Girls High School, Epe were used.

This was done to get appreciable number of female students to participate in the exercise. Also, from the investigator's experience of the female students' shyness to take part in the exercise in the mixed schools. It was also significant to note that female students were equally as important as their male counterparts because of the equal opportunity given to both sexes in the state and also the significant number of the female students in secondary schools in the state.

Table Two

Age and Class Distribution of the Respondents:

	Years	Number	Percentage
Age	12 - 15	108	45
Age	16 - 18	132	55
Total	12 - 18	240	100

Class Distribution

Class	Number	Percentage
I - II	10	4.2
III - V	225	93.8
Unidentified	5	2.08
Total	240	100.00

From table 2, it could be observed that 108 or 45% of the respondents were between the ages of 12 and 15 years while 55% or 132 were between the ages of 16 and 18 years. The total figure which showed 12 - 18 years indicated that the respondents in various schools were in their adolescent period of their chronological development. It was therefore expected that the children's understanding of the questionnaire and the preliminary talk given before administering the questionnaire in their classes would give reasonable assistance in their responses.

Likewise, the class distribution showed that in classes I to II there were 10 respondents and this was 4.2% of the total. Respondents between classes III to V were 225 which was 93.8%. Five pupils failed to indicate their classes, i.e. 2.1%.

A significant point to note in the computation was the fact that most of the respondents were in senior classes. The figure showed that 225 respondents which was 94% of the total were between classes III - V. The range between classes III to V was considered as senior classes in some secondary schools in the state. Only few schools with Higher School Certificate (H.S.C.) classes had another version of this classification. It

could therefore be seen that most of the respondents came from senior classes in the secondary schools.

However, 10 students or 4% were between class I - II. Five respondents or 2.0% did not indicate their classes. This could be considered a minor contribution to the computation.

### Organization of Games Played in Schools

In order to evaluate this, a number of games were provided on the questionnaire in which students were expected to pick the ones they played in their respective schools.

These games were:

1. Athletics
2. Volleyball
3. Hockey
4. Lawn Tennis
5. Cricket
6. Handball
7. Swimming
8. Table Tennis
9. Gymnastics
10. Any other.

Football, which was the most popular game, was left out. This selection of games by the pupils was



done in order to cross-check the games provided for the schools by the School Authorities. In other words, to verify hypotheses one. The respondent's answers were computed into the following statistical result.

Table Three

Statistical Representation of the Organization of Games

Played in Schools

Scores

10,8,8,3,8,3,7,8,7,3,5,4,9,2,8,1,2,1,9,8,1,3,3,4,1,4,1  
 2,1,1,2,1,4,3,1,1,1,1,1,1,1,3,3,1,3,1,1,2,1,1,1,1,2,1,  
 1,1,1,1,1,2,1,5,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,5,1,1,  
 1,1,6,1,1,3,6,1,3,4,1,1,7,1,1,7,1,1,1,1,1,1,1,4,1,6,4,4,  
 1,2,3,1,1,1,1,3,3,1,2,3,5,1,1,1,1,1,1,1,1,1,1,3,1,1,  
 1,2,1,1,1,1,1,1,1,1,4,1,0,4,1,1,1,1,1,1,1,1,4,1,3,3,1,  
 4,2,2,1,1,3,2,3,4,2,2,2,2,2,1,2,0,2,4,5,4,4,4,4,3,5,4,  
 5,5,2,3,4,5,7,7,1,1,1,1,1,1,1,1,1,1,1,2,1,1,1,1,1,1,1,  
 1,2,2,1,1,2,1,3,2,3,3,4,5,3,2,2,3,2,3,4,1

Class Int.	Tally	F	X	CF	FX
10.5 - 9.5		1	10	240	10
9.5 - 8.5		2	9	239	18
8.5 - 7.5		6	8	237	48
7.5 - 6.5		6	7	231	42
6.5 - 5.5		3	6	225	18
5.5 - 4.5		10	5	222	50
4.5 - 3.5		22	4	212	88
3.5 - 2.5		29	3	190	87
2.5 - 1.5		30	2	161	60
1.5 - 0.5		128	1	131	128
0.5 - 0.0		3	0	3	0
		EF =	240	EFX =	54

The total number of scores between 0 and 128 was 240. This showed the number of the respondents that took part in the exercise. The class interval were 0.0 to 0.5, 0.5 to 1.5, 1.5 to 2.5, 2.5 to 3.5, 3.5 to 4.5, 4.5 to 5.5, 5.5 to 6.5, 6.5 to 7.5, 7.5 to 8.5, 8.5 to 9.5, 9.5 to 10.5, bringing the total number of class intervals to 10. The tally for the raw scores of 240 was also shown in the the scores. The frequency from the base i.e. 0.0 to 05 showed 3, 128, 30, 29, 22, 10, 10, 3, 6, 6, 2, and 1 respectively. The sum of the frequency was 240. This showed the class mark of 0, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10. The cumulative frequencies were 3, 131, 161, 190, 212, 222, 225, 231, 237, 239 and 240. The FX showed 0, 128, 60, 87, 88, 50, 18, 42, 48, 18, and with the sum total of 549.

The mean is 2.29, the median is 0.91 and the mode is 1.

The mode was particularly useful in this computation. The mode by its nature shows the most frequently occurring value and normally a value which really exists. In this case, the mode was 1. That meant that most of the respondents indicated that the organized games played at school was in position number one and this was athletics.

This fact was confirmed from the fact that (a) total number of 128 respondents picked number 1 which was athletics. This was followed by number 2 game which was volleyball with 30 respondents and number 3 hockey with 29 respondents. Closely, following this was number 4 lawn tennis with 44 respondents. In more downward trend was number 5 cricket with 10 respondents followed by numbers 7 and 8, swimming, table tennis, 6 respondents each. This finally dropped to positions 0 which was no indication from any respondents to number 6 which was handball with 2 respondents. However, 1 pupil responded to point number 10 sighting football, which was deliberately left out in this exercise.

This frequency breakdown showed that the organization of games by the authority of schools was

very poor. Apart from athletics which was adequate because of intramural program and the state government policy, making the annual Inter-House Athletics Competition compulsory in all schools, there was no further appreciable organization of any other games by the schools.

Still further using this point to investigate hypothesis 1, the histogram and frequency polygon showed a positively skewed graph. This skewedness is positive to the item number 1 which was athletics.

Furthermore, table four indicates evaluation of the performance of the physical education which includes the physical education teacher, time table allocation, available facilities, significance of the lesson and Inter-house Sports by the respondents. The following results in percentages was computed.

Table Four

Degree of Evaluation of Physical Education Lesson in Schools

Questions	Yes		No	
	#	%	#	%
Qualified physical education teachers	200	83.3	39	16.3
Appearance of physical education on the school table	182	75.83	48	20

Table Four (cont.d)

Degree of Evaluation of Physical Education Lesson in Schools

Questions	Yes		No	
	#	%	#	%
Availability of sports facilities in schools	118	49.16	109	45.41
Respondents perception of the significance of physical education lesson	218	90.83	16	16.7
Respondents response on the importance of inter-house sports	229	95.41	7	2.91

A total number of 200 or (83.3%) of the respondents responded positively that their schools had qualified physical education teachers. 39 which is 16.3% of the respondents indicated no qualified physical education teacher. With this result, it was expected that the presence of the qualified physical education teachers in the schools would make the teaching of the lesson more effective.

Responding to the question on the appearance of physical education on the time table, 182 respondents which was 78.83% indicated "yes" while 48 which was 20% said "no". This was expected to be 100% positive because of the state government policy on the physical education lessons at schools. This indicated that

there were some classes that did not engage in physical education lessons.

On the question of availability of physical education facilities in the schools, 118 respondents which was 49.16% indicated that there were fairly adequate provision of facilities in their schools. 109 respondents indicated that there were no facilities. However, the verdict of only 49.16% of the total number of respondents on this question was not satisfactory, bearing in mind that athletics was the only satisfactory organized games in the schools.

Linking this to the question about the importance of physical education in the schools 218 or (91.83%) of the respondents knew and confirmed the significance of the subject. However, 16 or (6.7%) of the respondents gave a negative answer to this question. This meant that 6.7% of the respondents failed to recognize the importance of this subject.

Showing the significance of the annual Inter-house Athletics competitions in their various schools a total of 229 or (95.41%) of the respondent gave a positive verdict on this question. This was a laudable result because the respondents responded favorably to the state's decision to make the students participation in

the intramural sports as a way of engaging in physical education worthwhile. Only negligible number 7 or 2.9%) of the respondents did not respond favorably. This number was negligible to the positive result.

Still putting the program of physical education to test, there were some questions put to the pupils about the encouragement of the subject by the school authority, the principal's encouragement and of course the competency of the physical education teachers. The students response were arranged thus:

Table Five

Principals and Physical Education Teachers Evaluation on Encouragement of Physical Education

Questions	Yes		No	
	#	%	#	%
Whether principal show some concern	192	80	29	12
Competency of the physical education teacher	182	75.83	38	15.83

From table five it could be seen that 192 or (80%) agreed that their principal showed concern about the subject in their schools. While 29 or (12%) gave a negative reply about their principal's contribution to the subject. It could be seen that not all the principals encouraged the teaching of physical

education in their schools. Also, 182 or (75.83%) gave a favorable response about the competency of their physical educators. 38 or (15.83%) of the respondents said "no" about their own teacher's competency. However, this evaluation may have been influenced by other factors.

#### The Physiological Importance of Taking Part in Physical Education Lesson in Primary Health Care

The second hypothesis read "physical education has no relationship with the health of the secondary school children in Lagos State". This hypothesis was constructed to investigate and verify formally whether there was any contribution of physical education to any area of health of school children bearing in mind the primary health care. In investigating this submission, some questions were asked to get the feelings of the students who engaged in physical education lessons. The feedback obtained from the respondent's answers was constructed into table six.



Table Six

The Physiological Importance of Taking Part in Physical Education Lesson

Questions	# of respondents	%
Sleep	127	53.91
Study	78	32.5
Go to hospital	6	2.5
Feel unsatisfied	47	19.58
Hungry	56	23.33
Lose appetite	59	24.58
Eat well	83	34.58
Body less still	23	9.58
Flexible	65	27.08
Fat	23	9.58
Healthy	126	52.5
Add more weight	117	48.75
Lose weight	87	36.25
Grow tall	1	0.41
Grow fat	4	1.66
Eat less	23	9.58

Leading in this table was the number of responses from the respondents that physical education made the individual sleep 127 or (52.91%) and healthy 126 or (52.5%). The concept of these two answers were obvious because individuals could determine sleep and when healthy. However, the sharp drop in other components was not satisfactory. It could be remembered that not all the respondents selected their answers in this area. However, it dropped to add more weight 117 or (48.75%), lose weight 87 or (36.25%). The concept of enlargement of muscles as a result of efficient flow of

blood and development of muscular system might not be clear to the students. The significance of weighing at various levels of development and to keep to health rules as a system of appraising health were yet to gain ground in our educational system. Following this were eat well 83 or (34.58%), hungry 56 or (23.33%), feel unsatisfied 47 or (19.58%) both eat less 23 and fat 23 shared 9.58% each, go to hospital 6 or (2.5%), grow fat 4 or (1.66%) and grow tall 1 or (0.41%). There were contradictory answers among the items selected by the respondents. Another factor was the number that selected some items among the answers provided. More so when 20% of the respondents indicated that they felt unsatisfied after physical education lessons.

The third hypothesis which read "maintaining the primary health care of the students is not through physical education activities" was verified with questions on competitive sports. This was designed to verify the fact that by exposing an individual to competitive sports, the social, emotional, mental, and physiological attributes of health of an individual were put to test. The result obtained from the respondents were put into table seven below.

Table Seven

Standard of Competitive Sports in the Schools

Questions from the Questionnaire	Yes		No	
	#	%	#	%
Availability of the school teams	221	92.08	10	4.16
Number of Competitors in intramural sports	111	46.25	122	50.83
Number of competitors in extramural sports	163	67.91	50	20.83

On the question of availability of the school teams, a total number of 221 or (92.08) of the respondents indicated 'yes' to the question. This indicated that 92.08% of the respondents confirmed that their schools had school teams. Only 4.16% of the respondents indicated no school teams. It meant that a good number of schools exposed their students to competitions in sports. Further to this assertion, 111 (46.25%) of the students showed that they took part in intramural sports. While 122 or (50.83%) did not take part. This figure was not encouraging because the intramural sports in schools were designed to allow the weak, the strong and as a matter of fact, the student population in schools to take part in physical education activities in the schools. Furthermore, 163

or (67.91%) took part in extramural sports while 50 (20.83%) did not take part. This figure was contradictory to 46.25% which indicated that they took part in sports. Many factors might be responsible for this. It might be some of the respondents were not honest in filling this part because of exposure of their weaknesses in sports, their level of understanding of the questions or other variables. However, the significant point worthwhile to note was that there were both intramural and extramural sports going on within walls and outside the walls of the school. Therefore, the emotional, social, mental, and physical health of the students were catered for through physical activities of physical education and sports Lagos State.

The next hypothesis says, "that physical education does not reflect a program to achieve "Health for all by the year 2,000. In constructing this hypothesis to read this way, was the need to verify the benefits derived from the program of physical education through which this objectives of health could be achieved. It should be remembered that "Health for all by the year 2,000" was the latest global objectives of World Health Organization.

To verify this, some questions were designed to elucidate the health aspects of engaging in physical education activities by the respondents. The result obtained was constructed in the table below.

Table Eight

Effect of Taking Part in Physical Education Lessons by the Students

Health Outcomes	Number of responses	%
Healthy	172	71.66
Unhealthy	2	0.83
Whether P.E. activities boresome	9	3.75
Important	210	87.5
Social Acceptance	28	11.66
Recreational satisfaction	15	6.25
Enjoyment	13	5.41
Better understanding of friends	9	3.75
Waste of time	7	2.91
Help in study	45	18.75
Free time recreation	137	57.08
Athletic significance	96	40.00
Non-Athletic significance	8	3.33

One thing to note in this table was the poor reaction of the respondents to some of the questions about the health outcomes of their engagement in physical education activities. However, a total number of 172 or (71.66%) of the student indicated that they felt healthy after taking part in physical education. Also 210 or (87.5%) considered taking part in physical education as a free time recreation. A significant

number of 2 or (0.8%) considered taking part in physical education as unhealthy. As compared to 172 or (71.66%) which considered the activities important the 0.8% was so negligible to 71.66%. Therefore, the hypothesis is rejected.

This is more obvious in view of the fact that 96 or (40%) of the respondents agreed that taking part in physical education was for athletic excellence. These figures could further be used to reject the second hypothesis which read, "physical education has no relationship with the health of the secondary schools children in Lagos State". The above scores could also be used to strengthened the confirmation that physical education has relationship with the health of the secondary school children in Lagos State. 71.66% of the respondents agreed with the fact. 87.5% indicated that it was important, while 57.08% proved that it was for free-time recreation. These results are related to the health of individual child in Lagos State Secondary Schools.

Furthermore some facts from the respondent's answers agreed with this result. 9 or (3.75%) of the respondents considered physical education activities boring, 7 or (2.9%) said it was waste of time, 8 or

3.33%) thought it was of no athletic importance. These percentages were less in ratio to the positive figures 71.66% and 87.5%.

Perhaps it would be more convincing to round up this aspect of benefit derived from physical education in relation to health by looking at the simple and short table coined from the 19th question from the questionnaire which read, "taking part in physical education lesson makes your body (a) stiff, (b) bend in any direction, (c) fat, (d) healthy. In computing this into a table, answers "a" and "c" were fused to read unhealthy state while "b" and "d" provided a healthy state in table below.

Table Nine

Total Breakdown of Physical Education Lesson to the Health of the Respondents

<u>Respondent Reactions on</u> <u>Question 19</u>	<u>#</u>	<u>%</u>
Provide healthy state	172	71.66
Provide unhealthy state	2	0.83
Total	174	72.5

The above table although very simple in outlook summed up the area of investigation which brings out one of the benefits derived from taking part in physical education by respondents. Like other

questions in the questionnaire, not, all the respondents answered this particular question in their questionnaires. So total of 172 or (71.66%) respondents agreed that physical education puts them in health state while 2 or (0.83%) did not agree with this notion.

### Second Part of Results

The second part of the questionnaire which was designed for the medical team comprised of questions which were used to obtain feedback from this group. This was used to test hypotheses 5 and 6 respectively which read thus: 5. That the medical officers in the state do not believe in the program of physical education to achieve some of the objectives of the primary health care. 6. That medical officers do not recommend physical education to correct some defect in student's health.

However, before going to test these hypotheses, it would be good to see the distribution of the respondents, their location and status in the state. At these juncture, only the areas that cooperated in filling the questionnaires were used. Some departments in some areas were particularly not cooperative. A lot of obstacles were set because among many other reasons



given, "students did not bring back their results which sometimes were useful to the hospitals too". However, through unofficial, personal contact and other human relation principles, the following data were obtained in this section.

Table Ten

Breakdown of Medical Group That Took Part in the Exercise

Hospitals	#	%
Rural Health Center, Ketu	15	21.42
Ajeromi Ifelodun Local Government Hospitals, Badagry Division	22	31.42
Isolo Health Center, Isolo	10	14.28
Child-Welfare Health and Maternity Center, Orile Agege	23	32.85

From the four hospitals used the breakdown indicated Rural Health Center, Ketu 15 or (21.42%) respondents; Ajeromi Ifelodun Local Government Hospitals Badagry Division, 22 or (31.42%) respondents; Isolo Health Center, Isolo, 10 or (14.28%); and Child-Welfare Health and Maternity Center 23 or (32.85%).

The following observations were made. This was the most difficult set of respondents to obtain. The head of departments of the Health Centers themselves

either made their staff inaccessible or demanded unreasonable bureaucratic procedure. Also, the doctors and other para-medical staff either pretended to be "too busy to write anything now or said "please come back I have to see my patients" even when they had no patients to see. Most especially difficult were the nurses who always proved to be uncooperative. Also, the hospitals were made up of other sub-centers and different professionals. This led to the next table.

Table Eleven

Status of Medical Respondents

Professionals	#	%
Community Health Officers	8	11.42
Public Health Assistant Officers	27	38.57
Nursing Sister	3	4.28
Medical Officer (Doctors)	4	5.71
Auxiliary Nurse	1	1.42
Midwife	8	11.42
Teacher (Health Educators)	2	2.85
Civil Servants (Administrative staff)	3	4.28

N.B. 14 respondents did not indicate their status.

Topping the list among the professionals in the medical respondents were Public Health Assistant Officers, 27 or (38.57%). This was followed by both Community Health Officers and Mid-Wife Nurses with 8 or (11.42) each, the Medical Officers otherwise known as

Doctors 4 or (5.71%) both Nursing Sisters and Civil Servants (Administrative Staff) were 3 or (4.28%) each, close to this were the Teachers (Health Educators) 2 or (2.85%) and finally Auxiliary Nurse 1 or (1.42%). This distribution reflected the new trend in medical profession whereby Public Health Officers head Primary Health Centers and Clinics. Also there were different sections with series of heads in medical profession who were not medical officers.

Some questions were designed to test the contribution of physical education as correction of some defects in the primary health care program. This was done to verify the 5th hypothesis, "that the medical officers in the state do not believe some of the objectives of the primary health care". The responses from the respondents were computed as follows:

Table Twelve

Physical Education As a Correction of Some Defects in the Primary Health Care Program

	Yes		No	
	#	%	#	%
Present Complaints in the hospital can be reduced through physical education activities in schools	28	40	36	51.42

Table Twelve (cont.d)

Physical Education As a Correction of Some Defects in  
the Primary Health Care Program

	Yes		No	
	#	%	#	%
Wider scope of physical education to appease the health of school children	63	90	7	10
Physical Education should be reflected in the primary health care	65	92.85	4	5.71

The table above showed that 28 or (40%) of the total number of respondents agreed with the statement that present complaints in the hospital could be reduced through physical activities in schools. This number of respondents were smaller than the number of staff 36 or (50%) that disagreed with this statement. It meant that majority of hospital staff felt that this question was not the major cause of complaints in the hospital. But 63 or (90%) of the respondents agreed that there was need for a wider scope of physical education to appraise the health of the school children while 7 or (10%) respondents disagreed with this suggestion. It could therefore be concluded that almost all the respondents agreed with this notion. Also, 65 or (93%) of the respondents agreed with the statement that physical education should be reflected

in the primary health care. While 4 or (6%) did not agree with this notion. Out of the three questions designed to test this hypothesis, one question had 40 to 51 Percent in favor while two questions had 90 to 7 and 92.85 to 5.71% in favor of the hypothesis. Furthermore, the two favorable questions that scores the agreed points of 90% and 92.85 tested the wider scope of physical education to appraise the health of the school children and physical education should be reflected in the primary health care. These significant statements tested the view of the medical groups about the importance of discipline to achieve the objectives of the primary health care. The sixth and final hypothesis in this work read that the medical officers in the state do not believe in the program of physical education to achieve some of the objectives of the primary health care. In verifying this hypothesis like all other hypothesis, some questions were constructed to test the hypothesis. The result obtained was computed into the table below:

Table Thirteen

Medical Groups Response that Physical Education Should  
be Reflected in the Primary Health Care

Questions	Yes		No	
	#	%	#	%
Administration of physical education is satisfactory in the primary health care	42	69	22	31.42
Physical Education is an important aspect of primary health care	67	95.71	-	-
Recommendation of physical education as part of your treatment	59	84.28	9	12.85

On the question of administration of physical education being satisfactory in the primary health care 42 or (60%) of the respondents agreed with this statement while 22 or (31.42%) disagreed. 67 or (95.71%) of the respondents felt that "physical education is an important aspect of the primary health care". Again, this score is very significant in testing the hypothesis. There was no indication against this notion. It was 67 out of 70 respondents that answered the questions and they were positive. There was no negative response. Again on the question about whether they recommend physical education as part

of their treatment. 59 or (84.28%) responded 'yes' while 9 or (12.8%) indicated 'no' to this question.

## DISCUSSION

### Nature of the Students

The first table in data analysis showed the nature of student respondents who took part in the exercise. In the twelve schools located in five divisions of the state, a total number of 240 students were involved in the exercise. The breakdown of this was male students 122 or (50.8%) and female 118 or (49.2%) as many girls as boys were engaged in the study in order to give a thorough reflection of events taking place in the schools. Also, this is because there were more boys than girls in secondary schools in the state. Therefore, in this type of the exercise, this worker considered it necessary to engage equal number of boys and girls to have a balanced judgement of the occurrences in the schools.

### Age and Class Distribution

The second table showed the age and class distribution. There were two age ranges used, namely: 12-15 years and 16-18 years. In the 1-5 years (108) or (45%) of the respondents were involved. While between

16-18 years comprised of 132 or (55%) of the respondents. The respondents in the second range was higher because most of the students used were in higher classes of secondary education. It was expected that between 16-18 years of age a child would have left secondary school and if not, would be in higher classes four, five, or higher school certificate classes where such are available in the secondary schools. Also, it was also thought that given that age group, the worker would deal with matured respondents. These made for better understanding of questions asked and considerable reasonable feedback from the pupils. Also, reflected on this table was the class distribution. In the class distribution, the normal junior or senior classes that were occurring in the secondary school set up with Higher Certificate classes were used. These were classes I and II with just 10 or (4.2%) respondents and III to V with 225 or (93.8%). 5 or (2%) of the respondents did not indicate their classes. The majority of the respondents were in higher classes III, IV, and V. This was indicated by 93.8%) which was greater than 10% in forms I and II. It was important to note that in selecting some of the students to assemble in their classrooms at King Ado



High School Isale-Eko, Lagos, Eric Moore High School, Lagos and New Era Girls Secondary School, Surulere, Lagos, some students were forced to stay in the classes to complete the twenty respondents needed to complete each exercise. This accounted for this 4.2% of the respondents. Formally, students in classes three to five were requested for in the exercise. This was done to support the idea of engaging matured individuals to take part in the exercise. However, five respondents did not indicate their classes in this exercise. It might be that these five people were equally in the lower classes. The most significant figure to note here was the fact that 225 respondents which 93.8% came from forms III to V.

### Hypothesis I

#### Organization of Games Played in Schools

The games were arranged in this serial order to test hypothesis I.

- I. Athletics
- II. Volleyball
- III. Hockey
- IV. Lawn Tennis
- V. Cricket

- VI. Handball
- VII. Swimming
- VIII. Table Tennis
- IX. Gymnastics
- X. Any others.

Football which was considered the most popular game was deliberately omitted.

In analysis the measure of variability in the following result was computed.

The mean was 2.29, the median was 0.91 and the mode was 1. By using the frequency table to analyze the data, the mode was the most important point here because of its value to the exercise. It became apparent both from the tally, frequency polygon that the first item was the highest selected game in the exercise. The item 1 was athletics, in which 128 or (53%) of the respondents selected as the only game organized in their schools. A look at the histogram and frequency polygon will confirm this fact as compared to games. It dropped to 22, 29 and 30 in lawn tennis, hockey, and volleyball respectively. And to a much lower level in other games. Even though hypothesis 1 could not hold, this was an unacceptable level of organization of sports. The selection of

athletics as organized game by 128 respondents had complicated the figure otherwise the hypothesis was rejected. However, the reason for selection of this game, athletics by the respondent was not far fetched. The Lagos State Government made it compulsory for all secondary schools to organize the annual Inter-house Athletics Competition. The facility was the open ground or any available track field to be used by many schools in the various locations. Also, the equipment could be improvised and some possessed by the enthusiastic pupils themselves. This made the cost and expenditure on games less in the schools. Whereas most of the other games required special equipments and facilities to be provided for in the exercise. Therefore, most of the schools only used the medium of compulsory intramural athletics as their organized physical education activities in the schools.

#### Evaluation of Physical Education Lesson in Schools

Further to prove or disprove hypothesis one, table four was constructed to test the notion above.

While 200 or (83.3%) respondents indicated the presence of physical education teachers in their schools, 39 or (16.3%) responded negatively. 83.3% showed much improvement of professional staff in their

schools with the physical education teachers. It used to be no availability to only a few physical education teachers in schools in the state. This improvement could be thought of as a welcome change, bearing in mind the shortage of physical education teachers some years back. One of the factors that might be responsible for this would be the establishment of the Department of Health and Physical Education in the state College of Education to cater to the discipline, and to produce more teachers in the field.

Furthermore, 182 (75.8%) as compared to 48 (20%) indicated that physical education appeared on their time table as a subject to be taught. This figure showed 7.4% difference in the number of physical educators in the schools. This difference suggested that there were some physical educators in some schools without formally teaching the subject as a school discipline. It might be in such schools that the subject was included as co-curricular activities in the schools. This was a wastage as well as imbalance of education in such schools. More so, when 48 or (20%) confirmed that the subject was not in their schools' time table. One might view it that most of the respondents were in senior classes, it was logical to

reflect that they have passed through the stages of the junior classes.

Perhaps the question on availability of sports facilities in schools was not clear to them. Technically, the word "facilities" meant more to a physical educator than just a playground. It was therefore contradictory that 118 or (49.16%) of the respondent indicated 'yes' to this question while 109 or (45.41%) said 'no'. If facilities in other sports except some playgrounds for athletics were available, it would have been more distinct in the histogram and frequency polygon. The range was so high between athletics 128 and volleyball 30 to suggest any considerable adequacy in this area. As a matter of fact, this was an area that required elaborate attention, if games were to be taught at this stage of secondary school level. In physical education and sports, equipment and facilities always go together and usually equipment is used on facilities provided.

The significance of physical education cuts across age, sex, race, religion, political, social, or any other barrier. The instructional lesson given in the physical education at school would serve as academic and preliminary stages of the discipline. It had been

defined, tested, and accepted that physical education educates morally, physically, socially, and mentally. Therefore, the students that engaged in this subject would be able to appreciate and highlight which area of the attributes of the subject they really benefitted from. Therefore, on the question on the perception of the significance of physical education lesson 18 or (90.83%) of the respondents agreed that the subject was significant to them. This figure when compared to the 16 or (6.7%) in disagreement clearly showed the students' awareness of the importance of the subject to them. This need no further proof.

Finally on this table was the respondents' feeling on the importance of Inter-house sports. A total of 229 or (95.41%) respondents indicated that the Inter-house sport was important while only 7 or (2.91%) was in disagreement with this notion. Like the above figure there was no further proof on this area except to highlight some points. The Inter-House sport is a highly social organized and acceptable event in the schools. It involves the students, teachers, ministries, A.A.A. of Nigeria and people within the immediate community. It is the only event that encourages healthy rivalry between students and

teachers in the schools. Quite often while the male students are busy practicing, arranging, designing, cutting, lining the field and making other preparations, the females are usually engaged in aesthetic activities to grace the occasion. It is always an occasion of joy and happiness to all the students in the schools and their teachers. Hence, the figure 95.41% confirmed this assertion.

Encouragement of Physical Education by the Principal and his Physical Educator

There were two ideas that came to mind in writing questions on this area. First, it was necessary to evaluate the degree of encouragement by the principal and his physical educator and also determine the appreciation of their contribution by their students since the Primary Health Care recognized the role of the school to enhance its objectives. This was done to further test the first hypothesis which stated that "secondary school administrators have no idea and also neglect the contribution of physical education activities to achieve the objectives of the primary health of their students.

In table five, 192 or (80%) of the respondents agreed that their principals were interested in their

physical education activities in their schools. This number was appreciable compared to 29 or (12%) that disagreed with that statement. Bearing in mind that not all the principals would be sports oriented. 80% was equally good figure to uphold in this respect. Furthermore, 182 or (75.83%) said that their schools physical educators were competent. This confirmed that some of the physical education teachers were good at organizing their schools' Inter-house Athletics Competitions. However, 38 or (15.83%) declared their schools physical educators incompetent. There should be a way to check this before the number grows higher.

From these figures, therefore, it could be seen why the first hypothesis could not be upheld. The table showed that a good number of the principals (80%) had interest in and encouraged physical education. Similarly, 75.83% of the physical educators were competent. These figures could be said to be acceptable for this work. Therefore that the hypothesis which states "secondary school administrators have no idea and also neglect the contribution of physical education activities to achieve the objectives of the primary health care of their students" was rejected.



## Hypothesis II

### The Physiological Importance of Taking Part in Physical Education Lesson in Relation to Primary Health Care

Questions in this area were designed to verify the second hypothesis which was that "physical education has no relationship to the health of the secondary school children in Lagos State". To the statement that after physical education individual students fell asleep, the number of respondents were 127 or (52.91% feel unsatisfied 47 or (19.5%), hungry 56 or (23.33%), lose appetite 59 or (24.58%), eat well 83 or (34.58%), add more weight 117 or (48.75%), lose weight 87 or (36.25%), grow tall 1 or (0.41%), grow fat 4 or (1.66%).

Here again the respondents' understanding of the questions in the questionnaires was put to test. From the varied answers obtained it could be seen that the understanding of many of the respondents were below expectation. Variables such as to go to hospital 6 or (2.5%), feel unsatisfied 47 or (19.58%) were expected to attract almost if not equal figures. The same was observed for eat well 83 or (34.58%), and eat less 23 or (9.58%), body less still 21 or (8.75%), and flexible

65 or (27.08%), fat 23 or (9.58%) and grow fat 4 or (1.66%).

However, with this short comings, there were some key observations from the answers sufficient to be used for the physiological analysis.

As it should be expected among that age group, 127 respondents (52.91%) of the respondents contended that they felt sleepy after taking part in the lesson. This was a normal phenomenon in the biological rhythm of adolescents. Having engaged themselves in vigorous physical activities in games and sports with youthful vigor, their body systems that tend to want to rest and sleep. This was further supported by the 78 or (32.5%) who agreed that after such lessons they felt like studying. This can be expected since after taking part in physical activities or educational play, games and sports, the adolescent individuals settled down to their work with alertness, vigor, and fullest concentration.

However, the figures obtained for variables such as taking part in physical education induced hunger 56 or (23.33%), eat well 83 or (34.58%), lose appetite 59 (24.58%), eat less 23 or (9.58%), grow fat 4 or (1.66%), grow tall 1 or (0.41%) were very disappointing

in this regard. No doubt there was a fault here. Such a fault probably came from the respondents low level of understanding that led to the poor selection of answers from the questionnaires.

Similarly, 117 or (48.75%) of the respondents were of the opinion that physical education lessons helped them to add more muscles. Of course, this could be expected in the long run because such physical activities, allowed blood flow to various parts of the body, encouraged fairly good distribution of food to necessary areas, eliminated some waste products through sweat, urine and excreta, alert the coordination system and good muscular development. The body tends to over-compensate for the weight loss due to exercise. The worker expected a much higher percentage of the respondents to select this answer.

An appreciable number of respondents 126 or 52.5% reacted positively to the section of the questionnaires which stated that physical education lesson made them "healthy".

With the above figure of 52.5% therefore, the second hypothesis that "physical education has no relationship with the health of the secondary school children in Lagos State" was rejected.

### Hypothesis III

#### Competitive Sports in Schools

On the question of availability of the school teams in their various secondary schools, a large number of the respondents 221 (92.98%) indicated "yes". This was remarkable figure when compared to 10 (4.16%) respondents that indicated lack of such teams. Further indications in the questionnaires showed that the teams available were in athletics, volleyball, handball, basketball and of course, the most popular of all the games, football. There were various competitions in the state in some of the sports. Such competitions included the compulsory Annual Inter-house athletics competition from where the schools relay teams were produced. Such relay teams always competed in other schools sports on invitations. Also some of the materials for the biannual National Sports Festivals were produced through this medium. And this point made the third hypothesis to be rejected.

There were also volleyball, handball, and basketball competitions among secondary schools in the state. However, the crowd puller, most cherished, and widely published secondary school sport in Lagos State was the Annual Principal's Cup Competition for

football. Many of the seasoned players in clubs, state and national teams had at one time or the other taken part in one or more of these competitions. The pupils in their adolescent periods attached so much importance to winning the football competitions. To some, it was do or die for their school teams. This aspect was not encouraged in the competition. Furthermore, the school physical educators were always on test and stress before and during this competition. A mistake on his performance could cause him to lose some teeth, clothes torn to pieces or his dear life. There should be a way to check the annual emotional outburst attached to this sport by the youths. Also, other games should be encouraged to attain the high standards of participation experienced in football, less of course of thugery, vandalism, and hostility.

#### Hypotheses II and IV

##### Effect of taking part in Physical Education Lessons

From table 8 above, it could be clearly seen that the respondents were aware about the significance of the subject in their school's program. To support that assertion 210 or (87.5%) of the total respondent 240, agreed that the subject was important. Furthermore, next to this score was the fact that 172 or (71.66%)

said that the subject made them healthy. While 137 or (57.08%) indicated that it was for free time recreation. These three variables from the table are enough reasons from the respondent feedbacks to disagree with the fourth hypothesis. The respondents knew the importance and the benefits they derived from the subject. Since taking part in physical education lesson would aid some of the body functions, correct some bad body defects and aid their social and mental health, this worker felt that the physical education program in the schools should be given more recognition as a remedial approach to students health. More so, when the students themselves were aware of its contribution to their health. This notion could also be seen from the respondents. 9 or (3.75%) thought physical education lessons were boring, or 7 (2.91%) saw it as a waste of time, 8 or (3.33%) saw it to be of non-athletic significance while only 2 or (0.83%) indicated that it was unhealthy.

Comparing this later analysis with the above that physical education was important 210 of (87.5%), healthy 172 or (71.66%), and free time recreation 137 or (57.08%) from the same table, it could be seen that the respondents themselves disagreed with the fourth

hypothesis in relation to their health. The fourth hypothesis could not hold and it was therefore rejected. Physical education curriculum therefore reflects a program to achieve "Health for all by the year 2,000".

This fact was further strengthened and proved in table 9 as discussed in the result. The very simple table showed 172 or (71.66%) indicated that physical education lesson provided healthy state for them. While 2 or (0.83%) disagreed with this notion. The range of 71.66% to 0.83% was too wide to be given any consideration. More so when there were very few form two pupils as the respondents in this work. This 0.83% might be traceable to this group. Another significant point was the fact that a total of 72.5% of the whole respondents answered this important aspect of the questionnaire. It could therefore be deduced that the appraisal of health of the secondary school children in the state was tied to the physical education program.

With the results from tables 8 and 9, it was the opinion of this worker that both hypotheses 2 and 4 could not be accepted based on the parameters and the reasons given to them.

### The Medical Group

This section was contained in the second part of the questionnaire in pages 4 and 5.

It was done this way in order to test the 5th and 6th hypotheses.

The breakdown of the responses of those in medical and para-medical professions took part in the exercise was given in table 10 in the first part of this chapter under "result". Also, table 11 shows the status of the medical respondents.

A total number of 70 respondents took part in the exercise in this section.

### Remedial Importance of Physical Education

In testing the 5th hypothesis which read "that the medical officers in the state do not believe in the program of physical education to achieve some of the objectives of the primary health care, the data in table 12 was used.

90% of the respondents answered 'yes' to the question whether a wider scope of physical education was necessary to appraise the health of school children. Also, 92.85% agreed that physical education should be reflected in the primary health care program while 10% and 5.71% indicated 'no' respectively.



There was no more evidence required from any professional to indicate the need and significance of physical education program in schools. A good number of the medical professionals agreed that a lot could be achieved through the medical exercises that were the backbones of physical education. It was significant to note that the contributions of these professionals with regards to this exercise was significant. This was because they were in the child delivery and welfare systems. They made contributions and operated the machinery of health services in the hospitals. Finally, the school respondents reported to them for various ailments and to seek medical aids from them.

Therefore, their recognition of the fact that physical education programs should be reflected in the primary health care was very significant. So, was the opinion that the subject should cover a wider scope.

Furthermore, 40% agreed that some present complaints in the hospital could be reduced through physical activities in schools. This was also commendable in view of the fact that 40% agreed that the cure to some ailments could be approached through physical education programs in schools. There were

other sectors of life and disciplines that made this percentage acceptable for this exercise.

Therefore, the 5th hypothesis was also not acceptable because of the results obtained from the respondents.

### Hypothesis VI

#### Physical Education Program in the Primary Health Care

The 6th and the last hypothesis in this work read, "that the medical officers in the state do not believe in the program of physical education to achieve some of the objectives of the primary health care". There were questions designed to test this hypothesis respectively in table 13: (1) 60% of the respondents agreed that the administration of physical education was satisfactory in the primary health care while 31.42% disagreed; (2) 95.71% of the respondents were of the opinion that physical education was an important aspect of primary health care and there was 'no indication against this assertion; (3) 84.28% confessed recommendation of physical education as part of their treatment.

With these three analyses of the questions as contained in the questionnaire, it was therefore proved that medical officers in the state believed in the program of physical education to achieve some of the

objectives of the primary health care. Finally, the 6th hypothesis could not hold and it was therefore rejected.

#### IMPLICATION FOR SOCIAL WORK SERVICES

Zastrow (1985) explained that the practice of social work requires knowledge of human development and behavior; of social, economic, and cultural institutions; and of the interaction of all these factors. Obviously, these are parts of the physical education program examined in Social Work Practice. Similarly, physical education is that part of wholesome education in the school, that teaches socially, mentally, physically, and morally through physical activities. Conclusively, community health through the physical education program in the schools social work would help create healthy social acceptance, rehabilitation, community re-orientation, mental health programs, educational campaigns and other components of social health to achieve the objectives of primary health care. These are reflected in social work practice.

## CHAPTER FIVE

### SUMMARY, CONCLUSION AND RECOMMENDATIONS

#### Summary

The recent change in health principles from basic health care to primary health care necessitated the investigation on the contribution of physical education in this new area of health. This is because physical education contributes to the physical, social, moral, and mental health of an individual through physical activities.

The need for this study was made during the plenary session at the 1st International African Conference on Health Education, in Lagos in which Dr. J.O. Fawole of the Institute of Physical Education, University of Ife presented a paper, "Health Education as a Medical Cost Reducing Agent".

While answering questions at the end of UNILAG NAPER Week 1982/83 Session, the then Director of the Institute of Sports, National Sports Commission, Dr. Awoture Eleyae threw a challenge to physical educators to look into the ways in which physical education would affect the new health principle to achieve "health for all by the year 2,000". It was on this challenge that the goal for this study was set.

The purpose of this study was to investigate the contribution of physical education programs in Lagos State Secondary Schools to the new concept of health care. Twelve schools in five divisions of Lagos State were used. Twenty questionnaires were administered in each school. The questionnaires were administered on the spot after seeking permission from the school authority.

A summary of the results of this study showed that:

1. Primary health care was new and that physical education was one of its organs of operation in the health of secondary school children in Lagos State.
2. The schools' administrators in the state share the idea that contributions to physical education activities which can be utilized to achieve the objectives of primary health care in their schools.
3. The relationship of physical education to the health of the secondary school children in Lagos State was established.

4. The curriculum of physical education reflected a program to achieve "Health for all by the year 2,000".
5. The maintenance of primary health care of the students in Lagos State secondary school was through physical education activities.
6. The medical officers in the state hospitals recommended physical education to correct some defects in the students health.
7. Also, the medical officers in the state believed in the program of physical education to achieve some of the objectives of the primary health care.
8. The awareness to intensify a more dynamic program of physical education to appraise the health of school age children in primary health care system was necessary.

### Conclusion

Based on the findings in this study, the investigator made the conclusion: more insight was gained into the operations of physical education programs at the secondary school stage. The areas of interests in the state, in this case, the state policy was known. The areas of concentration, i.e. athletics by the physical educators came into light. Also, the

feelings and views of the students to both the physical education programs in their schools, the contribution and competency of both the principals and physical educators were observed.

The investigator observed from the study that some of the students knew that they engaged in physical education lessons because of their health. While others used the lessons as a good therapy to concentrate on their study. These two factors contributed to the physical and mental health which were attainable through physical activities. Other components of physical education such as social, moral and aesthetic attributes served as aids to the health of school age children in Lagos State.

### Recommendations

Based on the findings and observations in this work, the following recommendations are made:

1. A thorough investigation into how physical education could be engaged upon at the grass roots levels in the state to achieve the objectives of primary health care by the year 2,000.
2. Each component of physical education (social, mental, physical, and moral) should be

investigated in relation to the contribution of the discipline to the primary health of the students.

3. Other areas of sports and games such as hockey, basketball, handball, cricket, swimming, gymnastics and lawn tennis should be given more attention to reach the standard of participation of games like football and athletics in maintaining the health of individuals through physical education in schools.
4. Physical educators should seek an answer into pugnacious and vandalistic attitudes of students attributed to games like soccer in order to maintain social health through primary health care in schools.
5. Physical educators should always attend and contribute papers in the seminars organized by health educators and vice versa.
6. A physical education program should be designed for the state hospitals to further enhance the services of physical educators to achieve the global objectives in Lagos State.
7. Physical educators should have direct offices and places in the state hospitals, health centers and



clinics to render immediate services in child health services.

8. Physical educators and medical officers should seriously plan a joint workable program in health care delivery systems to reduce incidents of risk factors in this area.
9. There should be a very adequate and realistic provision of facilities and equipment in the schools and communities to make physical education programs work in the primary health care.

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## APPENDIX

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The Questionnaire

The purpose of this questionnaire is to find answers to numerous problems affecting Physical Education programme the new concept of health the Primary Health Care.

It is worthwhile to evaluate the interactions of these two areas and how they affect one another in the educational structure in Lagos State. Also it is necessary to weigh the two areas as they affect the health students in secondary schools in the state.

Information given in your responses will be very useful for evaluating these programmes as they affect one another.

The last part of the questionnaire will be answered by medical officers, public health officers, officers in the state ministries of health.

Thank you.

A.G.A. Anjorin  
Department of Physical Education  
University of Lagos

Please check [ ] right answer that best suited your answer.

1. Which of the following games do you play in your school?
  1. Athletics
  2. Volleyball
  3. Hockey
  4. Lawn Tennis
  5. Cricket
  6. Handball
  7. Swimming
  8. Table Tennis
  9. Gymnastics
  10. Any other
2. Do you have the facilities for any of these games in your school? Yes / No.
3. Do you have a qualified Physical Education Teacher(s) in your school? Yes / No.
4. Do you have Physical Education on the school time table? Yes / No.
5. Do you like taking part in Physical Education lesson? Yes / No.
6. Do you consider your school Physical Education lesson helpful to you? Yes / No.

7. Do you consider your school Inter-house athletic program an important aspect of your school program? Yes / No.
8. Do you have enough equipment for Physical Education in your school? Yes / No.
9. Do you have adequate facilities and equipment for the games you like to play in your school? Yes / No.
10. Do you have enough encouragement from your school authority to take part in Physical Education lesson? Yes / No.
11. After taking part in Physical Education lesson you always feel: (a) Sad, (b) Happy, (c) Healthy, (d) unhealthy.
12. You always like to take part in Physical Education in order to satisfy: (a) your teacher, (b) your friends in the class, (c) yourself, (d) your parents.
13. Do you consider the Physical Education activities of your school program: (a) important, (b) unimportant, (c) boresome, (d) unhealthy.
14. You take part in Physical Education activities in order to achieve good: (a) health, (b) social acceptance, (c) recreation satisfaction, (d) enjoyment.
15. Physical Education lesson and activities in your school give you avenue to: (a) know your friends better, (b) waste time, (c) help you study, (d) learn how to use your free time.
16. Taking part in physical activities makes you: (a) tough, (b) grow big, (c) makes you flexible, (d) damage your body.
17. After taking part in physical education you always like to: (a) sleep, (b) study, (c) go to hospital, (d) feel unsatisfied.

18. Taking part in Physical Education makes you: (a) hungry, (b) loose appetite, (c) eat well, (d) eat less.
19. Taking part in Physical Education lesson makes your body: (a) stiff, (b) bend in any direction, (c) fat, (d) healthy.
20. After taking part in Physical Education activities you always: (a) add more weight, (b) lose weight, (c) grow tall, (d) grow fat.
21. What reason can you give for your dislike of Physical Education lesson in your school:
- 
- 
- 
22. Do you consider your Physical Education teacher experienced and enterprising enough for you to like the subject?
- 
- 
- 
23. Comment on his usefulness methodology and effectiveness on the subject.
- 
- 
- 
24. What effort is your Principal or any other teacher(s) make to help in Physical Education lessons or activities in your school?
- 
- 
- 
25. Do you have any competition going on within the walls of your school?
- 
- 
-

26. Do you have school team? Name the sport or game and whether you belong to any team.

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27. How many competitions does your school take part in sport? Do you win any of such competitions?

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28. Give reasons why your school is doing or not doing well in sports.

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29. Would you like to be a Physical Education teacher? Why and why not?

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30. Do you have first aid box or Public Health Sister Nurse in your school?

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This section is to be completed by Medical Officers, Public Health Officers and Officials in the State Ministries of Health.

Name of Hospital:

Name of the Ministry:

Section/Department:

Division in the State:

Please check [    ] Yes or No

1. Do you consider Physical Education an important aspect of education? Yes / No
2. Most of the accidents with the school children occur during Physical Education lesson. Yes / No.
3. The present Physical Education Administration is satisfactory with the Primary Health Care in the state school. Yes / No
4. Physical Education is an important aspect of Primary Health Care. Yes / No
5. Physical educator should be able to render first aid services? Yes / No.
6. Most of the present complaints in the hospital can be prevented through physical activities in the schools. Yes / No.
7. You sometimes recommend Physical Education activities as part of your treatment. Yes / No.
8. Physical Education should be discouraged in schools. Yes / No.
9. Physical Education should cover a wider scope in primary and secondary schools to appraise the health of the school child. Yes / No.
10. The Physical Education program should be reflected in the Primary Health Care. Yes / No.

## PLEASE FILL IN YOUR ANSWER

11. Through which medium do you consider the Physical Education program in the state satisfactory to help the school age child.

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12. What Physical Education program do you consider helpful to the total health of the school age child in Lagos State?

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13. Do you consider the awareness of Physical Education in the state satisfactory for the Primary Health Care?

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14. What suggestion do you have for the healthful Physical education program in the state?

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Thank you.

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